## VILLAGE OF BABYLON

153 W. Main St. Babylon, NY 11702

| PERMIT#        |  |
|----------------|--|
| <b>ISSUED:</b> |  |

## APPLICATION LANDSCAPER PERMIT

| NAME OF COMPANY :   |  |  |
|---|--|--|
| Mailing address_  |  |  |
|   |  |  |
| NAME OF PRINCIPAL   |  |  |
| Email address for future electronic billing ,remi                         | nders, and notices:  |  |
| Phone #(daytime)  |  |  |
| FEE: \$40 FOR ONE TRUCK AND TRAILER(S). \$                                | 10 FOR EACH ADDITIONA  | AL TRUCK   |
| Vehicles: # OF TRUCKS # OF TRAILERS_ (CURRENT REGISTRATIONS MUST BE PROVI | DED)   |  |
| **************************************                                    | ceived a copy of Section 210 of lations pertaining to landscapt being revoked. All fees are named is to be kept in the vehicle | of the Village Code of the<br>pers. Failure to comply<br>non-refundable for any<br>e, and the decals for the |
| The permit expires on December 31 <sup>st</sup> of the year in w          | which it is issued.  |  |
| CACALLERY (PRINCIPLE AT COMPANY)  | DDYNESS AND  | D.A.W.   |
| SIGNATURE (PRINCIPAL IF COMPANY)  | PRINT NAME   | DATE   |

State mandate requires Proof of Worker's Compensation and Disability Insurance- please submit Certificate of Insurance (advise your Ins. Broker this cannot be on the Accord Form) to be submitted with each License issued, including renewals.

If you are not required to carry Workers Comp- we need a Certificate of Exemption, See reverse

## To obtain exemption certificate (CE- 200) from the Workers Compensation Board:

If you have access to a computer with internet and you have a printer you can file for your exemption electronically, and print the form out.

Go to to their website: www.wcb.state.ny.us/

Click on: WC/DB

**EXEMPTION (ON BOTTOM RIGHT)** 

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Click on: Request for WC/DB EXEMPTION (FORM CE 200)

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Click on: Access Web-based Application

Follow instructions to sign on

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Printout CE-200 and submit to us with your application

If you do not have access to a computer with internet, you must go to the Workers Compensation District Office- you will complete the application online at their location.

They are located at 220 Rabro Drive, Suite 100

Hauppauge, NY 11788 Phone: (866) 681-5354